

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>		<i>5/4/10</i>
I.P.E. CLASSIFIER	<i>W</i>	<i>45</i>	<i>5/10</i>
FORMALITY REVIEW			
RESPONSE F RMALITY REVIEW	<i>DB</i>	<i>70014</i>	<i>6/26/10</i>

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	Original
1	5/1/10
2	5/1/10
3	5/1/10
4	5/1/10
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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